

AUTOMATIC PAYMENT AUTHORIZATION

I authorize the City of Powell to automatically withdraw from my checking or savings account (as specified below) and pay the amount of my monthly utility service bill(s) on the due date of the bill.

If the due date falls on a weekend or holiday, the City of Powell will draft the account the following business day.

This authorization shall continue until I notify The City of Powell in writing of cancellation. Notice must be received by the City of Powell Utility Department three businesses in advance of the payment date. Shorter notice may be accepted but is not guaranteed.

CITY OF POWELL UTILITY INFORMATION

Utility Account Number: _____

Customer Name: _____

Service Address: _____

Customer Phone Number: _____

BANK ACCOUNT INFORMATION

Bank Name: _____

Account Holder Name: _____

Bank Account Number: _____

Account Type: Checking Savings

Bank Routing Number (9 digits): _____

Bank Phone Number: _____

ELECTRONIC FUND TRANSFERS CAN ONLY BE DONE WITH BANKS IN THE UNITED STATES

PLEASE SIGN NAME(S) EXACTLY AS YOU DO ON YOUR CHECKS

Signed: _____

Date: _____

I wish to cancel my authorization of automatic payment.

Signed: _____

Date: _____

IMPORTANT: PLEASE ENCLOSE A BLANK, VOIDED CHECK OR DEPOSIT SLIP SO WE CAN VERIFY THE NECESSARY ROUTING AND ACCOUNT NUMBERS

Go Paperless with e-mail billing

Yes, please email my bill to: _____

No thank you, please continue to mail my bill.